

INRCIA GRANT APPLICATION Part I – General Information

Provider Name:					
Provider Address:					
Street Type of Entity: Check on	City e.	State	Zip		
Street City State Zip Type of Entity: Check one. Private company, for profit Education Resource Center Other: Please indicate, below. University Contact Person: Contact Person's Title: Fax: () Grant Category: Indicate the category for which you are applying. Check only one. Please note that your organization is applying for more than one grant category, you must complete a grant application for EACH category for which your organization is applying. Positive Behavior Supports Transition to Adulthood Effective Assessment and Instruction Effective Evaluations Autism Presentation and Interview Session Time Selection: In the event that your organization is sked to attend a Presentation and Interview Session (see Section 2.7.4 of the Grant Notice for details) blease indicate the time of day that would best work for your organization. All Presentation and					
Contact Person's Title:					
E-mail:	City State Zip To profit Education Resource Center Other: Please indicate, below. Fax: () The the category for which you are applying. Check only one. Please note that g for more than one grant category, you must complete a grant y for which your organization is applying. To Supports aulthood mpliant IEPs ment and Instruction ions The week Session Time Selection: In the event that your organization is n and Interview Session (see Section 2.7.4 of the Grant Notice for details) by that would best work for your organization. All Presentation and at the Indiana Department of Education January 19, 2010 – January 22, Indiana. Please note that this selection is only to indicate the applicant's act as a guarantee that the applicant's time preference can or will be to p.m.				
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asked to attend a Presentation please indicate the time of d Interview Sessions will be hell 2010, located in Indianapolis	on and Interview Sessi ay that would best wo d at the Indiana Depo s, Indiana. Please note t act as a guarantee t	on (see Section 2.7.4 of the rk for your organization. All ertment of Education Januar that this selection is only to	Grant Notice for details) Presentation and y 19, 2010 — January 22, indicate the applicant's		
12:00 p.m. – 5:0	•				

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Applications must be **received** by the Indiana Department of Education, via e-mail, by 4:30 p.m. EDT on November 30, 2009. Faxed applications will <u>not</u> be accepted.

Applications must be e-mailed to:

Kim Clement kclement@doe.in.gov

Assurances must be mailed to:

Kim Clement
Indiana Department of Education
Division of Differentiated Learners
ATTN: INRCIA Assurances
151 W. Ohio Street
Indianapolis, IN 46204

Applications that are late or not submitted by mail will not be reviewed and the applicant will be notified on January 1, 2010 that grant application was denied due to failure to comply with application submission requirements. No exceptions will be made for late applications.



INRCIA GRANT APPLICATION Part II – Grant Application Narrative

The narrative portion of the INRCIA grant application must be divided into the sections described below. The same outline format presented in this grant application must be used in the applicant's response with all components of each section addressed in the order given. The narrative portion of the grant application must be double-spaced, with no smaller than one-inch margins and may not exceed 25 pages. Font must be 12-point Times New Roman. Where appropriate, supporting documentation may be referenced by a page and paragraph number. If supporting documentation is referenced, the narrative of the grant application must contain a meaningful summary of the referenced material. The referenced document must be included as an appendix to the grant application, with referenced sections clearly marked. If there are multiple references or multiple documents, these must be listed and organized for ease of use by the State. Citations must be in APA format. Some parts of the grant application require additional information from depending on the category in which the applicant is applying. Applicants need only to provide additional information that pertains to the category in which they are applying. Any grant application that does not adhere to all of these requirements will be discarded and not reviewed.

Section I: Significance

- a. Describe the professional development materials and activities that your resource center will provide for LEAs and schools. Be sure to include your rationale for utilizing these professional development materials and activities as well as the research that supports their use.
- b. Describe the way(s) in which your resource center will assist LEAs and schools in correcting identified deficiencies related to one or more of the areas in the State Performance Plan (SPP) and the Annual Performance Report (APR).

<u>Positive Behavior Support</u>: Must demonstrate the capacity to respond to assignments from the IDOE to intervene with selected LEAs based on Indicator 1, 2, 4, 5, 6, 9, 10 and significant disproportionality.

<u>Transition to Adulthood</u>: Must demonstrate the capacity to respond to assignments from the IDOE to intervene with selected LEAs based on Indicator 1, 2, 13 and 14 data.

<u>Effective and Compliant IEPs</u>: Must demonstrate the capacity to respond to assignments from the IDOE to intervene with selected LEAs based on any pattern of noncompliance including results from any Indicator but particularly 8, 13, 16, 17, 18, and 19 data.

<u>Effective Assessment and Instruction</u>: Must demonstrate the capacity to respond to assignments from the IDOE to intervene with selected LEAs based on Indicator 3, 4, 5, 6, 7, 9, 10 and significant disproportionality data.

<u>Effective Evaluations</u>: Must demonstrate the capacity to respond to assignments from the IDOE to intervene with selected LEAs based on Indicator 4, 9, 10, 11, 12 and significant disproportionality data.

c. Describe the way(s) in which your resource center will work to help LEAs and schools prevent potential systemic insufficiencies related to one or more of the areas in the SPP and the APR.

Transition to Adulthood:

- 1. Must provide technical assistance to support compliant transition IEPs
- 2. Must provide professional development to support effective post school outcome preparation.

Effective Assessment and Instruction:

- 1. Must be a resource for supporting state testing decisions and the use of resulting test data
- 2. Must support professional development around ISTEP+ accommodations, ISTAR, ISTAR-KR and the Modified ISTEP+
- 3. Must address accessibility of instruction, Universal Design for Learning, and differentiated instruction

<u>Effective Evaluations</u>: Must be a resource for professional development around the initial evaluation and reevaluation processes.

- d. Describe the methods of delivery that your resource center will employ in presenting professional development materials and activities to LEAs and schools. Explain how these methods of delivery are responsive to the findings from the *Special Education Needs Assessment Survey*, which can be found at: http://www.doe.in.gov/exceptional/speced/whatsnew.html
- e. Describe the way(s) in which the proposed professional development materials and activities are purposeful in integrating cultural competency training. Provide an explanation demonstrating that your resource center has the capacity to respond to assignments from IDOE related to LEA and school noncompliance for Indicators 4, 9 and 10 and significant disproportionality.

Section II: Quality of Project Design

- a. Describe your resource center's project plans. Be sure to explain how the resource center plans to scale up and leverage resources to build state and local capacity.
- b. Describe your resource center's timeline for working with LEAs and school that will meaningfully support the resource center's focus area and allow for multiple professional development opportunities and long-term engagement for teachers and staffs.
- c. Describe your resource center's plan to build relationships and collaborate with other resource centers and the IDOE to ensure that the State has the capacity to address local LEA and school needs supported by your resource center.

Positive Behavior Support:

Must support and participate in National SPDG work groups

Effective and Compliant IEPs:

- 1. Must support professional development around ISTART7
- 2. Must be a resource for Article 7 compliance

Autism:

- 1. Must support and participate on the Autism Commission and related work groups
- 2. Must provide expertise and serve as a statewide resource for school personnel in supporting students with autism

Effective Evaluations:

- I. Must support and participate in periodic meetings with the IDOE and First Steps work group
- 2. Must support and collaborate with vendor selected to collect and analyze data for significant disproportionality and Indicators 4, 9 & 10 and the determination of disproportionate representation due to inappropriate identification
- d. Describe the way(s) in which your resource center will encourage parental and community involvement in resource center functions.
- e. Describe the way(s) in which your resource center will collaborate with IDOE to ensure that the resource center's collection procedures and/or data analysis will integrate with IDOE systems so that no application interfaces or data collection schemes are new or separate from IDOE systems.

<u>Effective Evaluations</u>: Must coordinate stakeholder and expert consultation for quality assurance efforts on the future development of the evaluation tools in ISTART7

<u>Effective and Compliant IEPs</u>: Must coordinate stakeholder and expert consultation for quality assurance efforts on the future development of ISTART7

III: Quality of Project Personnel and Proposed Contributions to Research

- a. Name and describe the roles of the key project personnel who will contribute to the successful development and implementation of a resource center in your focus area. Include resumes for each key person as an appendix. Please note that the key project personnel may not be changed without advance permission from IDOE.
- b. Explain how the qualifications of each project personnel will enable your resource center to help lead LEAs and schools to improvement in your focus area. Include an explanation of key project personnel's relevant training experience and address their experience and background in your resource center's focus area.
- c. Describe your organization's process for ensuring the employment of persons who are members of groups that have traditionally been underrepresented based on race, color, national origin, gender, age, or disability.
- d. Describe your resource center's plan to assist LEAs and schools in broadening their knowledge base in effective systems change and instructional practices related to students with special needs. Be sure to include details of products and processes by which knowledge will be distributed to the field. Include all necessary research citations.

IV: Quality of the Management Plan

- a. Describe your resource center's goals, objectives and outcomes to be achieved by your proposed project. If necessary, provide the goals, objectives and outcomes in chart form. Explain how the goals are measureable and how outcomes are sustainable.
- b. Explain how the intended outcomes, above, are aggressive yet attainable both on time and within budget.
- c. Describe your resource center's project plan, including project tasks, timelines and responsibilities.
- d. Describe your resource center's procedures for gaining feedback from LEAs and school and utilizing that feedback for the continuous improvement in operation of the proposed project.

<u>Positive Behavior Support</u>: Must comply with Project Goals and Objectives already established in the state's SPDG application which can be found at:

http://www.doe.in.gov/exceptional/speced/docs/Indiana_State_Professional_Development_Grant_Description_2009.pdf

V: Adequacy of Resources

Organization Name

- a. Explain how your budget is adequate to support the proposed project.
- b. Explain how the costs outlined in your budget relate to the goals, design and significance of the proposed project.



INRCIA GRANT APPLICATION Part III – Budget Information

Complete the budget application provided, below.

ACCOUNT NO.	FTE	EXPENDITURE DESCRIPTION	SUBTOTAL	LINE ITEM TOTAL
1. PERSONNEL (i	nclude	positions and names)	•	
	0.00	TOTAL CERTIFIED SALARIES		\$ -
2. FRINGE: Fringe	e should	d be based on actual known costs or an established	d formula. Fixed charg	es/fringe
benefits listed belo	ow are j	for the personnel listed under CERTIFIED SALARIES	above and only for the	e percentage of
time devoted to the	his proje	ect. List		
		TOTAL CERTIFIED FIXED CHARGES / FRINGE		ć
		BENEFITS		\$ -
3. TRAVEL:				
out-o	f-state			
ir	n-state			
		TOTAL TRAVEL		\$ -

4. CONTRACTED SERVICE	S: (list the type of contracted services to be provided	not the vendor's	name)
	TOTAL CONTRACTED SERVICES		\$ -
5 MATERIALS AND SLIPE	PLIES: (include the total amount to be used to purcha	se testing nrograms	•
	lies; include all anticipated costs)	se testing, programm	natic ana, or
	,,		\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
	TOTAL MATERIALS AND SUPPLIES		\$ -
C FOLUDATINE AND TECH		hanna Bunavida list s	•
	HNOLOGY: Enter the total amount of equipment purc trate sheet. Equipment is defined as "tangible, non-ex		
	a useful lifespan of more than one year".	tpenduble/non-cons	umubie
personal property having	TOTAL EQUIPMENT AND TECHNOLOGY		\$ -
7 OTHER CERVICES, line		add lines if needed	•
	ude a specific description of services to be provided;	add lines, ii needed)
Stipends			
Telephone			
Postage			
Photo copy			
Print/Publication			
Room/building rental			
Equipment rental			
	TOTAL OTHER SERVICES		
TOTAL ANTICIP	ATED EXPENDITURES (SUM OF SECTIONS 1-7 OF THIS	FORM).	

EQUIPMENT AND TECHNOLOGY: The following list represents the anticipated equipment and technology purchases.

Modifications to the equipment list must first be approved by the Indiana Department of Education

QUANTITY	DESCRIPTION	UNI	UNIT PRICE		TOTAL PRICE	
		\$	-	\$	-	
		\$	-	\$	-	
		\$	-	\$	-	
		\$	-	\$	-	
		\$	-	\$	-	
		\$	-	\$	-	
		\$	-	\$	-	
		\$	-	\$	-	

	\$ -	\$ -
	\$ -	\$ -
TOTAL EQUIPMENT AND TECHNOLOGY		\$ -